

2007 VT

## Corporate Income Tax Return



Form CO-411

(Rev. 10/07)

4 1 1 1 1 Fiscal Year Beginning 2007 and Ending CHECK ALL APPROPRIATE BOX(ES) Check here if name or address has changed CONSOLIDATED ACCOUNTING INITIAI RETURN PERIOD CHANGE RETURN PRINT OR TYPE COMPLETE NAME AND ADDRESS BELOW EXTENDED AMENDED FINAL RETURN (CANCELS ACCOUNT) RETURN VERMONT B. **FISCAL** BUSINESS YEAR ENDING ACCOUNT NUMBER m) FEDERAL RETURNS CANNOT BE PROCESSED WITHOUT NUMBER FIFLDS B AND C COMPLETED UNITARY GROUP RETURN No PRINCIPAL VT CORP. FID # E. USING COMPUTER GENERATED D. 6-DIGIT NAICS NUMBER A copy of the Federal corporate income tax return OR SUBSTITUTE FORM? must be attached to this return. Please PRINT in BLUE or BLACK ink. Enter all amounts in whole dollars. Place an "X" in the box left of the line number to indicate a loss amount. FOR C CORPORATIONS ONLY 1. FEDERAL (or RECOMPUTED Federal) TAXABLE INCOME of a UNITARY GROUP, A CONSOLIDATED GROUP, OR A SINGLE ENTITY. (See instructions)...... Check here if you have taken the "Bonus" depreciation (see IRC 168(K)). If this box is checked, Line 1 <u>must</u> be recomputed eliminating the provision for the federal special bonus depreciation. See instructions. For Group returns, recompute separately. 2. ADD (a) Interest on non-Vermont state and local obligations. 2(a). (b) State and local income or franchise taxes. . . . . . . LESS (c) Interest on U.S. Government obligations. . . . . . . 2(c). (d) "Gross Up" required by IRC Sec. 78 and other 2(d) (e) Targeted Job Credit salary and wage expense addback..... 2(e) NET TAXABLE INCOME {Line 1 *plus* Lines 2(a) and 2(b) *less* Line 2(c), 2(d), and 2(e)}. . . NON-BUSINESS INCOME and FOREIGN DIVIDENDS ALLOCATED EVERYWHERE (VT Form BA-402, Part 1, Line 1a and/or 1c). NET APPORTIONABLE INCOME Subtract Line 4 from Line 3. Enter the result here..... 6. VERMONT APPORTIONMENT PERCENTAGE (100% or amount from VT Form BA-402, Line 22). 7. NET INCOME APPORTIONED TO VERMONT (Multiply Line 5 by Line 6). NET INCOME ALLOCATED AND APPORTIONED TO VERMONT (Enter amount from Line 3 above, or if not 100% VT, enter result of adding VT Form BA-402, Part 1, Line 1b and Line 1d, & Line 7 above.)....... 10. VERMONT NET TAXABLE INCOME (Line 8 less Line 9) . . . . . 10 11. VERMONT TAX per tax computation schedules on Side 2 (\$250. minimum). . . . . . 11. SMALL FARM CORPORATION HOMEOWNER'S / CONDO ASSOC. Check box if exception NO VERMONT to minimum tax applies: (\$75 minimum) ACTIVITY (\$0) (Federal Form 1120-H only) (\$0) IF BALANCE DUE (Line 15, Side 2) IF REFUND REQUESTED (Line 17, Side 2) If credit claimed (Line 12, Side 2), check here

(continued on back)



\* 0 7 4 1 1 1 2 9 9 \*

calculation scl	hedule or worksheet, EATI A	BA-404, Part II, Column C, Line 23 Annual Activity Report, authorization OVT Form BA-405, if applicable)	n		$\Box, \Box$					,			
<b>13.</b> TAX (Line 11	less Line 12, but not less th	nan the minimum tax)		13.	$\square, \square$			$\rfloor, \square$		,			
	r Year Payments, Estimated es 14(b) & 14(c)}, and Paym	Payments (including ents with Extension 14(a).	,			], 🗆	$\Box$ ,		. •				
For informat	ion purposes only. Includ	le these amounts in Line 14(a) a	above.										
(b) Non	resident Partner Payments	from VT Form WH-435.											
Indic	cate Source FID #	14(b).	, $ $	$\square$ , $\llcorner$		$\lrcorner, \bigsqcup$	⊥,∟		. •				
(c) Non	resident Real Estate Withho	olding (VT Form RW-171).											
Indic	cate Source FID #	14(c).	, 📙	LJ,L			Ш,∟		. •				
(d) 200 <i>d</i>	6 Overpayment Applied (cor	mbined for group) 14(d).	,						. •				
(e) Sum	n of Lines 14(a) and 14(d).		14	4(e).	,					, 🔲			
15. BALANCE DU {Line 13 less		enalty, late fees and interest.}		15.	$\Box,\Box$	<u> </u>				$\Box$			
<b>16.</b> Overpayment to be applied to 2008 for principal Vermont corporation Reg. §1.5862(d). Provide its FID #										, 🗌			
17. Overpayment	t to be refunded			17.	$\Box,\Box$	$\Box$ ,[		$], \square$		$, \square$			
				6	Peturn is	s due on	the 15th	day of t	he 3rd	mor	nth		
	TAX COMPUTAT	ION SCHEDULE		•		ving the y							
(with taxable periods beginning January 1, 2007)					Payment is due on the 15th day of the 3rd month following								
IF VERMONT						the year end, even if the return is extended. Corporations with liabilities over \$500, see instructions for estimated pay-							
NET INCOME IS TAX IS					with liabilities over \$500, see instructions for estimated payments, VT Form CO-414.								
\$10,000 or less 6.00% (minimum tax is \$250.).						payable to	: Verm	ont Depa	artmei	nt of	Taxes		
		us 7.00% of excess over \$10		Sena	return .	Vermo	nt Depar	tment of					
\$25,001 and over \$1,650 plus 8.50% of excess over \$25,000.							<i>I check to:</i> 133 State Street  Montpelier, VT 05633-1401						
I be a reduce	t lama on officer the	mont room and blo for the town of	ma m li g :	الماليان	wa wu i!						th at th'		
		gent responsible for the taxpayer's co my knowledge. If prepared by a perso											
		e used for any other purpose, or made	available t	to any ot	her perso	n, other th	an for the p	preparatio	n of thi	s retur	n unless		
a separate valiu co	nisent form is signed by the tax	payer and retained by the preparer.											
Signature of Officer or Authorized Agent		Printed name Date		Daytime to number (o				May the Dept. of Taxes discuss this return with the preparer named?  Yes No					
Paid	Preparer's signature					Date		Check if self-employed					
Preparer's	Preparer's printed name					Preparer's Social Security No. or PTIN							
Use Only	Name and address					EIN							
-	of preparer's firm or business					Preparer's Telephone Number							